### Massachusetts HIV/AIDS Data Fact Sheet

## Injection Drug Users

**June 2007** 

#### Introduction

Since the beginning of the HIV/AIDS epidemic, injection drug use (IDU) has been a leading cause of HIV infection. Injection drug use not only contributes to the spread of HIV through the sharing of syringes and other equipment among those who inject, but also through transmission to the sexual partners and children of injection drug users.

#### **General Statistics:**

- As of December 31, 2005, 30% (N=4,773) of people living with HIV/AIDS (PLWH/A) were reported to have a history of IDU. An additional 6% (N=899) of PLWH/A were exposed to HIV through heterosexual sex with an injection drug user. Forty children were born to HIV-infected mothers who injected drugs and/or had sex with an injection drug user.
- Among people diagnosed with HIV infection within the three-year period 2003 to 2005, 17% (N=460) had a history of IDU and an additional 4% (N=94) were exposed through heterosexual sex with an injection drug user.

#### **Regional Distribution:**

IDU (both IDU and IDU in men who have sex with men (MSM/IDU)) was the leading reported mode of exposure in the Central and Western Health Service Regions among people living with HIV/AIDS. Among people recently diagnosed with HIV infection, IDU was the leading reported mode of exposure in the Western Health Service Region.

Among cities with over 20 people diagnosed with HIV infection within the three-year period 2003 to 2005, the following have the highest proportions of infection with IDU as the reported mode of exposure (N=number with IDU or MSM/IDU as exposure mode):

•	<b>New Bedford</b>	42%	(N=22)
•	Holyoke	38%	(N=19)
•	Fall River	30%	(N=10)
•	Springfield	27%	(N=56)
•	Worcester	26%	(N=37)
•	Framingham	24%	(N=8)
•	Lawrence	22%	(N=16)
•	Chelsea	16%	(N=4)
•	Chicopee	15%	(N=4)
•	Revere	15%	(N=5)

#### Gender:

- Of 4,773 PLWH/A who reported injecting drugs, 71% were male and 29% were female.
  Similarly, among people recently diagnosed with HIV infection with IDU exposure, 7 4% were male and 26% were female.
- Among PLWH/A with IDU-related exposures, such as heterosexual sex with an injection drug user and being a child born to an HIV-infected mother who injected drugs or had sex with an injection drug user, females accounted for 79% and males 21% of cases. Similarly, females accounted for 70% of recent IDU-related HIV diagnoses and males 30%.
- Nationally, it is estimated that 26% of females living with HIV/AIDS at the end of 2005 (in 33 areas with confidential name-based HIV reporting) were exposed through IDU<sup>1</sup>, compared to 30% in Massachusetts.
- Nationally, it is estimated that 18% of males living with HIV/AIDS at the end of 2005 (in 33 areas with confidential name-based HIV reporting) were exposed through IDU<sup>1</sup>, compared to 25% in Massachusetts.

Note: People of undetermined risk are redistributed to an exposure category in the national estimates, but not in the Massachusetts proportions. This may make the difference between national and state proportions appear smaller than it is.

#### Race/Ethnicity:

- Forty percent of PLWH/A on December 31, 2005, with a history of IDU, were white (non-Hispanic), 23% were black (non-Hispanic), 36% were Hispanic and 1% were of other race/ethnicities. Similarly, among people recently diagnosed with HIV infection with a history of IDU, 43% were white (non-Hispanic), 19% were black (non-Hispanic), 37% were Hispanic and 1% were of other race/ethnicities.
- Of females living with HIV/AIDS with a history of IDU, 49% were white (non-Hispanic) compared to 36% of males and 27% were Hispanic compared to 40% of males. Twenty-three percent of both males and females were black (non-Hispanic).

#### Age:

- Among persons recently diagnosed with HIV infection, those with a history of IDU were older than those with other modes of exposure. Five percent of injection drug users diagnosed with HIV infection within the three-year period 2003 to 2005 were 13-24 years old compared to 9% of people exposed to HIV through all other modes of exposure.
- On December 31, 2005, 2% of PLWH/A exposed to HIV infection through IDU (or male-to-male sex and IDU) were under 30 years old compared to 8% of PLWH/A exposed through all other modes of exposure, 17% were 30-39 years old compared to 25%; 52% were 40-49 years old compared to 41%; and, 29% were age 50 years or above compared to 25% of PLWH/A without a history of IDU.

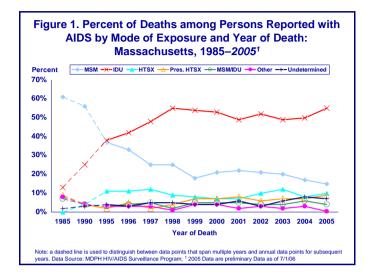
#### **HIV Related Morbidity and Mortality among IDU:**

### **AIDS Diagnoses**

 From 1996 to 2003, injection drug use accounted for the largest number of AIDS diagnoses among exposure modes. From 2004 to 2005 the number of AIDS diagnoses attributed to male-to-male sex surpassed the number attributed to injection drug use.

#### Mortality with AIDS

 From 1996 to 2005, the proportion of deaths among people diagnosed with AIDS represented by those who had a history of IDU rose from 42% to 55%.



# Injection Drug Use among Youth in High School<sup>2</sup>

- In 2005, 1.5% of all respondents to the Massachusetts Youth Risk Behavior Survey reported ever using a needle to inject an illegal drug.
- As in prior years, in 2005, injection drug use was more common among males (1.9%) than among females (0.8%), but did not vary substantially by grade.

# Injection Drug Use among Program Participants:

### Needle Exchange Participants<sup>3</sup>

 Among 5,348 participants in state-funded needle exchange programs in state fiscal year 2006, 34% reported being under age 20 years at first injection.

#### Substance Abuse Admissions<sup>4</sup>

- From state fiscal year 1996 to 2005, the percentage of admissions to state-funded substance abuse treatment programs reporting the use of a needle to inject drugs within a year of admission rose from 21% to 31%. During this time period the number of admissions reporting needle use within one year increased 58% from 20,480 in fiscal year 1996 to 32,418 in fiscal year 2005.
- From state fiscal year 1996 to 2005, the percentage of admissions to state-funded substance abuse treatment programs for heroin addiction increased from 26% to 38% of total admissions. During this time period, the number of admissions for heroin use increased by 53% from 25,630 in fiscal year 1996 to 39,169 in fiscal year 2005.
- Ninety-one percent of admissions to statefunded substance abuse treatment programs in fiscal year 2005 who reported needle use within the past year were unemployed, compared to 76% of total admissions; 29% were homeless compared to 20% of total admissions.

#### Data Sources:

All HIV/AIDS Case Data: Massachusetts Department of Public Health (MDPH) HIV/AIDS Surveillance Program, Data as of July 1, 2006

#### Additional Reference of Interest:

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For more detailed information and a description of data limitations please see "HIV/AIDS in Massachusetts: An Epidemiologic Profile," available online at www.mass.gov/dph/aids

<sup>&</sup>lt;sup>1</sup> Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2005. Vol. 17. Atlanta: US Department of Health and Human Services, Centers for Disease Control and Prevention; 2006:[19]. Also available at: http://www.cdc.gov/hiv/topics/surveillance/resources/reports/

<sup>&</sup>lt;sup>2</sup> Youth Risk Behavior Survey Data: Massachusetts Department of Education, Youth Risk Behavior Survey

<sup>&</sup>lt;sup>3</sup> MDPH HIV/AIDS Bureau, Prevention and Education Program

<sup>&</sup>lt;sup>4</sup> MDPH Bureau of Substance Abuse Services